



1710 3732

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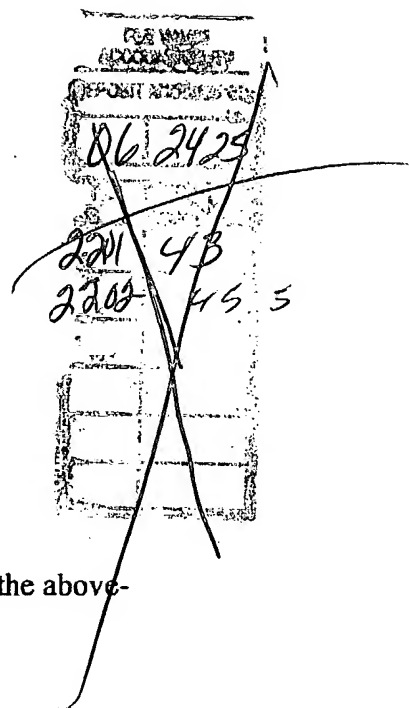
Donna M. Colon
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/052,834
Applicant : David J. Richmond
Filed : 01/17/2002
Art Unit : 3732
Examiner : Doan, Robyn Kieu

Docket No.: : REVOL-58825
Customer No. : 24201

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450



AMENDMENT

Dear Sir:

In response to the Office action dated May 20, 2004, please amend the above-
identified application as follows:

08/20/2004 ASINGLET 00000002 062425 10052834

01 FC:2201 43.00 DA
02 FC:2202 45.00 DA

fee

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10052834
MOD ME - 5882

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	46	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	46 minus 20 = *	26
INDEPENDENT CLAIMS	8 minus 3 = *	5
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 51	Minus ** 46	= 5
Independent	* 9	Minus *** 8	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

BEST AVAILABLE COPY

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE	OR	RATE	FEE
BASIC FEE	370.00	OR	BASIC FEE	740.00
X\$ 9=	234	OR	X\$18=	
X42=	210	OR	X84=	
+140=		OR	+280=	
TOTAL	814	OR	TOTAL	81

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X\$ 9=	45	OR	X\$18=	
X42=	43	OR	X84=	
+140=		OR	+280=	
TOTAL	88	OR	TOTAL	
ADDIT. FEE		OR	ADDIT. FEE	

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL		OR	TOTAL	
ADDIT. FEE		OR	ADDIT. FEE	

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL		OR	TOTAL	
ADDIT. FEE		OR	ADDIT. FEE	